Fil	l in this information to ident	ify your case:		
Un	ited States Bankruptcy Court	for the:		
WE	ESTERN DISTRICT OF NEW	YORK		
Ca	se number (if known)		— Chapter <b>11</b>	
				Check if this an amended filing
V If m	nore space is needed, attach	on for Non-Individu  a separate sheet to this form. On the a separate document, <i>Instructions for</i>	op of any additional pages, write th	ne debtor's name and the case number (if
1.	Debtor's name	LCAV Enterprises, LLC		
2.	All other names debtor used in the last 8 years			
	Include any assumed names, trade names and doing business as names	DBA Maley's Pub		
3.	Debtor's federal Employer Identification Number (EIN)	56-2313437		
4.	Debtor's address	Principal place of business	Mailing addr business	ess, if different from principal place of
		92 E Market St	19 Elm Stre	eet, Apt 101
		Corning, NY 14830 Number, Street, City, State & ZIP Code	Corning, N	Y 14830 mber, Street, City, State & ZIP Code
		Number, Street, City, State & ZIF Code	F.O. Box, Nu	mber, Street, City, State & ZIF Code
		Steuben County	Location of place of bus	principal assets, if different from principal iness
		County	Steuben Co	
			Number, Stre	et, City, State & ZIP Code
5.	Debtor's website (URL)	https://www.facebook.com/male	yscorning/?rf=12115724789844	2
6.	Type of debtor	■ Corporation (including Limited Liabi	lity Company (LLC) and Limited Liabil	ity Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

	CAV Enterprises, LL	.0		noun,			
	Name						
7.	Describe debtor's business	A. Check one:					
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))					
		☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))				
		☐ Railroad (as defined in 11 U.S.C. § 101(44))					
		☐ Stockbroker (as o	efined in 11 U.S.C. § 101(53A))				
		☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))				
		☐ Clearing Bank (as	defined in 11 U.S.C. § 781(3))				
		■ None of the abov	е				
		D. Ohaalaali dhadaan	4.				
		B. Check all that app	•				
			(as described in 26 U.S.C. §501)	- ( d-5d': 45-H-0-0-00-0)			
		<u> </u>	any, including hedge fund or pooled investment vehicle	e (as defined in 15 U.S.C. §80a-3)			
		investment advise	or (as defined in 15 U.S.C. §80b-2(a)(11))				
			erican Industry Classification System) 4-digit code that	best describes debtor.			
		<del></del>	courts.gov/four-digit-national-association-naics-codes.				
		7224					
8.	Under which chapter of the	Check one:					
	Bankruptcy Code is the debtor filing?	☐ Chapter 7					
	debtor ming:	☐ Chapter 9					
	A debtor who is a "small	■ Chapter 11. Chec	ek <b>all</b> that apply:				
	business debtor" must check	· .	The debtor is a small business debtor as defined in	n 11 LLS C. § 101(51D), and its aggregate			
	the first sub-box. A debtor as defined in § 1182(1) who		noncontingent liquidated debts (excluding debts or	wed to insiders or affiliates) are less than			
	elects to proceed under subchapter V of chapter 11		\$2,725,625. If this sub-box is selected, attach the roperations, cash-flow statement, and federal incon				
	(whether or not the debtor is a		exist, follow the procedure in 11 U.S.C. § 1116(1)(E	B).			
	"small business debtor") must check the second sub-box.	ı	The debtor is a debtor as defined in 11 U.S.C. § 11				
	check the second out box.		debts (excluding debts owed to insiders or affiliate: proceed under Subchapter V of Chapter 11. If the				
			balance sheet, statement of operations, cash-flow				
		_	any of these documents do not exist, follow the pro-	ocedure in 11 U.S.C. § 1116(1)(B).			
		_	A plan is being filed with this petition.				
		[	Acceptances of the plan were solicited prepetition accordance with 11 U.S.C. § 1126(b).	from one or more classes of creditors, in			
		ı	☐ The debtor is required to file periodic reports (for e	example, 10K and 10Q) with the Securities and			
			Exchange Commission according to § 13 or 15(d)	of the Securities Exchange Act of 1934. File the			
			Attachment to Voluntary Petition for Non-Individua (Official Form 201A) with this form.	ils Filing for Bankruptcy under Chapter 11			
		[	☐ The debtor is a shell company as defined in the Se	ecurities Exchange Act of 1934 Rule 12b-2.			
		☐ Chapter 12					
	Managed and and an income	· 					
9.	Were prior bankruptcy cases filed by or against	■ No.					
	the debtor within the last 8	☐ Yes.					
	years? If more than 2 cases, attach a						
	separate list.	District	When	Case number			
		District	When	Case number			

ebt	= or tr = into prioco;	LLC		Case number (if	known)				
	Name								
0.	Are any bankruptcy cases pending or being filed by business partner or an affiliate of the debtor?								
		_							
	List all cases. If more than attach a separate list	I, Debtor			Relationship				
		District		When	Case number, if known				
1.	Why is the case filed in this district?	Check all that appl	y:						
	tilis district?				sets in this district for 180 days immediately				
		, ,	•	or for a longer part of such 180 days	•				
		☐ A bankruptc	y case concerning de	btor's affiliate, general partner, or par	tnership is pending in this district.				
2.	Does the debtor own or	■ No							
	have possession of any real property or personal	Angword	pelow for each prope	rty that needs immediate attention. At	tach additional sheets if needed.				
	property that needs	☐ Yes. Allswell		,					
	immediate attention?	Why doe	es the property need	d immediate attention? (Check all th	at apply.)				
		☐ It pos	es or is alleged to po	se a threat of imminent and identifiab	le hazard to public health or safety.				
		What	is the hazard?						
		☐ It nee	ds to be physically se	ecured or protected from the weather.					
			☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).						
		☐ Other		meat, daily, produce, or securities-re-	ated assets of other options).				
			s the property?						
				Number, Street, City, State & ZIP (	Code				
		Is the pr	operty insured?	, , , , , , , , , , , , , , , , , , ,					
		□ No							
		☐ Yes.	Insurance agency						
			Contact name						
			Phone						
	Statistical and admin	istrative informatio	n						
3.	Debtor's estimation of	. Check one.							
J.	available funds	_		. 9					
				stribution to unsecured creditors.					
		☐ After an	y administrative expe	nses are paid, no funds will be availa	ble to unsecured creditors.				
4.	Estimated number of	<b>1</b> -49		□ 1,000-5,000	□ 25,001-50,000				
	creditors	■ 1-49 □ 50-99		☐ 5001-10,000	□ 50,001-100,000				
		☐ 100-199		<b>1</b> 0,001-25,000	☐ More than100,000				
		□ 200-999							
5	Estimated Assets	П фо. ф=г		Полосто ст. т	Патаа				
J.	Latiliated Assets	□ \$0 - \$50,000 □ \$50,001 - \$100,	000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion				
		<b>=</b> \$100,001 - \$500		□ \$50,000,001 - \$30 million	☐ \$1,000,000,001 - \$10 billion				
		□ \$500,001 - \$1 n		□ \$100,000,001 - \$500 million					
6.	Estimated liabilities	□ \$0 - \$50,000		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				

Debtor	LCAV Enterprises, LLC	Case number (if known)	
	Name \$50,001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
	■ \$100,001 - \$500,000 □ \$500,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion

_	L,	١.	
Δ		rn	

LCAV Enterprises, LLC Case number (if known)

Request for Relief,	Declaration,	and	<b>Signatures</b>

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# 17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 4, 2021

MM / DD / YYYY

X	/s/	Larry	L.	Caval	llaro
---	-----	-------	----	-------	-------

Larry L. Cavallaro

Printed name

Signature of authorized representative of debtor

Title Sole Memeber

### 18. Signature of attorney

X	/s/	Robert	В.	Gleichenhaus,	Esq.
---	-----	--------	----	---------------	------

Date March 4, 2021

MM / DD / YYYY

Signature of attorney for debtor

Robert B. Gleichenhaus, Esq.

Printed name

Gleichenhaus, Marchese & Weishaar, P.C.

Firm name

930 Convention Tower 43 Court Street

Buffalo, NY 14202

Number, Street, City, State & ZIP Code

Contact phone

(716) 845-6446

Email address

4098570 NY

Bar number and State

Fill in this info	Fill in this information to identify the case:						
Debtor name	LCAV Enterprises, L	_					
United States E	Sankruptcy Court for the:	WESTERN DISTRICT OF NEW YORK	-				
Case number (i	if known)		_	Check if this is an amended filing			
				amended filing			

### Official Form 202

# **Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# D

### **Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- ☐ Amended Schedule
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 4. 20

X /s/ Larry L. Cavallaro

Signature of individual signing on behalf of debtor

Larry L. Cavallaro

Printed name

**Sole Memeber** 

Position or relationship to debtor

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors** 

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Best Case Bankruptcy

Fill in this information to identify the case	Fill in this information to identify the case:							
Debtor name								
United States Bankruptcy Court for the:	WESTERN DISTRICT OF NEW YORK		Check if this is an					
Case number (if known):			amended filing					

### Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	If the claim is fully unsecured, fill in only unsecured claim amount. If		t and deduction for d claim.
		and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
American Express P.O. Box 981535 El Paso, TX 79998		Credit				\$6,755.00
NYS Dept. of Taxation & Finance Bankruptcy Unit PO Box 5300 Albany, NY 12205-0300		Sales tax penalties				\$70,495.00
NYS Dept. of Taxation & Finance Bankruptcy Unit PO Box 5300 Albany, NY 12205-0300		Sales Tax				\$67,165.00

Official form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured claims

page 1

Fill in this information to identify the case	se:					
Debtor name LCAV Enterprises, LLC						
United States Bankruptcy Court for the:	WESTERN DISTRICT OF NEW YORK					
Case number (if known)			Check if this is an			
			amended filing			

## Official Form 206Sum

# **Summary of Assets and Liabilities for Non-Individuals**

12/15

Par	Summary of Assets		
1.	Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)		
	1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i>	\$	226,261.00
	1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i>	\$	108,239.00
	1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i>	\$	334,500.00
Par	2: Summary of Liabilities		
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$	209,488.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
	3a. Total claim amounts of priority unsecured claims:  Copy the total claims from Part 1 from line 5a of Schedule E/F	\$	67,165.00
	<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$	77,250.00
4.	Total liabilities Lines 2 + 3a + 3b	\$	353,903.00

Fill in t	his information to identify the case:			
Debtor				
	States Bankruptcy Court for the: WESTERN DISTRICT	T OF NEW YORK		
		TOF NEW TORK		
Case no	umber (if known)			Check if this is an amended filing
Offic	cial Form 206A/B			
	edule A/B: Assets - Real a	nd Personal Pro	perty	12/15
Include which h or unex Be as co the debt	e all property, real and personal, which the debtor ow all property in which the debtor holds rights and pow ave no book value, such as fully depreciated assets pired leases. Also list them on <i>Schedule G: Executor</i> complete and accurate as possible. If more space is notor's name and case number (if known). Also identify	vers exercisable for the debtor's or assets that were not capitalize by Contracts and Unexpired Lea eeded, attach a separate sheet to the form and line number to wi	s own benefit. Also included. In Schedule A/B, list a ses (Official Form 206G). to this form. At the top of hich the additional informatics.	e assets and properties any executory contracts any pages added, write
For Par	rt 1 through Part 11, list each asset under the appropule or depreciation schedule, that gives the details for interest, do not deduct the value of secured claims Cash and cash equivalents	riate category or attach separat r each asset in a particular cate	e supporting schedules, s gory. List each asset only	once. In valuing the
1. Does	the debtor have any cash or cash equivalents?			
□ N	o. Go to Part 2.			
	es Fill in the information below. ash or cash equivalents owned or controlled by the c	dehtor		Current value of
All C	asii di casii equivalents dwneu di controlleu by the t			
2	•			Current value of debtor's interest
2.	Cash on hand			
<ol> <li>3.</li> </ol>	•		Last 4 digits of account number	debtor's interest \$1,000.00
	Cash on hand  Checking, savings, money market, or financial brok	serage accounts (Identify all)	ŭ	debtor's interest \$1,000.00
	Cash on hand  Checking, savings, money market, or financial broken Name of institution (bank or brokerage firm)	serage accounts (Identify all) Type of account	number	debtor's interest \$1,000.00
	Cash on hand  Checking, savings, money market, or financial broken Name of institution (bank or brokerage firm)	serage accounts (Identify all) Type of account	number	debtor's interest \$1,000.00
	Checking, savings, money market, or financial broken Name of institution (bank or brokerage firm)  3.1. Corning Credit Union	serage accounts (Identify all) Type of account  Share	number	debtor's interest \$1,000.00 \$341.00
	Cash on hand  Checking, savings, money market, or financial broken Name of institution (bank or brokerage firm)  3.1. Corning Credit Union  3.2. Corning Credit Union	Serage accounts (Identify all) Type of account  Share  (operating) Checking	2890 2890	\$341.00 \$3,093.00
3.	Cash on hand  Checking, savings, money market, or financial brokename of institution (bank or brokerage firm)  3.1. Corning Credit Union  3.2. Corning Credit Union  3.3. Corning Credit Union	Serage accounts (Identify all) Type of account  Share  (operating) Checking	2890 2890	\$341.00 \$3,093.00
<ol> <li>3.</li> <li>4.</li> </ol>	Cash on hand  Checking, savings, money market, or financial broken Name of institution (bank or brokerage firm)  3.1. Corning Credit Union  3.2. Corning Credit Union  Other cash equivalents (Identify all)	Serage accounts (Identify all) Type of account  Share  (operating) Checking  (payroll) Checking	2890 2890 8110	\$341.00 \$3,093.00 \$5.00
3. 4. 5.	Cash on hand  Checking, savings, money market, or financial broken Name of institution (bank or brokerage firm)  3.1. Corning Credit Union  3.2. Corning Credit Union  Other cash equivalents (Identify all)  Total of Part 1.	Serage accounts (Identify all) Type of account  Share  (operating) Checking  (payroll) Checking	2890 2890 8110	\$341.00 \$3,093.00 \$5.00

■ No. Go to Part 3.

☐ Yes Fill in the information below.

Debtor	LCAV Enterprises, LLC	<u> </u>	Case	number (If known)	
Part 3:	Accounts receivable s the debtor have any accounts	s receivable?			
	o. Go to Part 4.				
=	es Fill in the information below.				
11.	Accounts receivable				
	11a. 90 days old or less:	500.00	-	<b>0.00</b> =	\$500.00
	fac	e amount	doubtful or uncollect	ible accounts	
12.	Total of Part 3.				\$500.00
	Current value on lines 11a + 11	b = line 12. Copy the total	I to line 82.	_	·
Part 4:	Investments				
13. <b>Doe</b> s	s the debtor own any investme	nts?			
□ N	o. Go to Part 5.				
■ Ye	es Fill in the information below.				
				Valuation method used for current value	Current value of debtor's interest
14.	Mutual funds or publicly trad Name of fund or stock:	ed stocks not included in	n Part 1		
15.	Non-publicly traded stock an partnership, or joint venture Name of entity:	d interests in incorporate	ed and unincorporated bus % of ownership	sinesses, including any inte	rest in an LLC,
	d/b/a Maley's Pub		•		
	15.1.			N/A	bUa Ycb`m`
16.	Government bonds, corporat Describe:	e bonds, and other nego	tiable and non-negotiable	instruments not included in	Part 1
17.	Total of Part 4.				\$0.00
	Add lines 14 through 16. Copy	the total to line 83.			
Part 5:	Inventory, excluding agric				
18. <b>Doe</b> s	s the debtor own any inventory	/ (excluding agriculture a	ssets)?		
	o. Go to Part 6.				
■ Ye	es Fill in the information below.				
	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including go	oods held for resale			
22.	Other inventory or supplies Liquor inventory	N/A	Unknown	Replacement	\$4,000.00
	Beer inventory	N/A	Unknown	Replacement	\$1,000.00
	-		-		Ψ1,000.00
Official	Form 206A/B	Schedule A/B	Assets - Real and Persor	nal Property	page 2

Debtoi	LCAV Enterprises, LLC Name		Case	number (If known)	
	Miscellaneous inventory, paper products, cleaning products, mixers, etc.	N/5	Unknown	Replacement	\$500.00
23.	Total of Part 5. Add lines 19 through 22. Copy t	the total to line 84		-	\$5,500.00
24.	Is any of the property listed in ■ No □ Yes				,
25.	Has any of the property listed ■ No □ Yes. Book value	in Part 5 been purchas  Valuation	-	e bankruptcy was filed?  Current Value	
26.	Has any of the property listed  ■ No □ Yes				
□ Y Part 7: 88. <b>Doe</b>	o. Go to Part 7. es Fill in the information below.  Office furniture, fixtures, as the debtor own or lease any of the control			?	
■ Y	es Fill in the information below.				
	General description		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office desk, cabinet, etc.		Unknown	Liquidation	\$200.00
40.	Office fixtures				
41.	Office equipment, including al communication systems equipmiscellaneous telephony, of fax, etc.	pment and software	and Unknown	Liquidation	\$1,000.00
42.	Collectibles Examples: Antique books, pictures, or other art objecollections; other collections, me	ects; china and crystal; st	amp, coin, or baseball card		
43.	Total of Part 7. Add lines 39 through 42. Copy t	he total to line 86.		-	\$1,200.00
44.	Is a depreciation schedule ava	ailable for any of the pro	operty listed in Part 7?		

■ No Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 3

Debtor	LCAV Enterprises, LLC	Case	number (If known)	
	□ Yes			
45.	Has any of the property listed in Part 7 been appraise	d by a professional within	the last year?	
43.	■ No	u by a professional within	the last year :	
	Yes			
Part 8:	Machinery, equipment, and vehicles s the debtor own or lease any machinery, equipment, or	r vehicles?		
_	o. Go to Part 9.	· vemoles.		
	es Fill in the information below.			
	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and	titled farm vehicles		
	47.1. <b>2021 GMC Denali</b>	Unknown	Comparable sale	\$60,000.00
48.	Watercraft, trailers, motors, and related accessories E floating homes, personal watercraft, and fishing vessels	Examples: Boats, trailers, mo	otors,	
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding machinery and equipment) Miscellaneous bar equipment (14) LED TV's (1) Walk-in cooler (1) Ice machine and bin (1) Bar sink Ice bin(s) Back bar cooler(s) Various Chairs and stools	farm Unknown	Liquidation	\$30,000.00
	POS	Unknown	Liquidation	\$1,500.00
	Glassware	Unknown	Liquidation	\$100.00
	Security system	Unknown	Liquidation	\$5,000.00
51.	Total of Part 8.			\$96,600.00
	Add lines 47 through 50. Copy the total to line 87.		-	Ψοσ,σσσ.σσ
52.	Is a depreciation schedule available for any of the pro ■ No □ Yes	perty listed in Part 8?		
53.	Has any of the property listed in Part 8 been appraised  ■ No □ Yes	d by a professional within	the last year?	
Part 9: 54. <b>Does</b>	Real property s the debtor own or lease any real property?			

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 4

Debtor	LCAV Enterprises, LLC Name		Case	number (If known)	
	o. Go to Part 10.				
■ Ye	es Fill in the information below.				
55.	Any building, other improved rea	al estate, or land which	the debtor owns or in w	hich the debtor has an inter	est
	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
	92 E Market Street Corning, NY 14830	fee simple	Unknown	Tax records	\$226,261.00
56.	Total of Part 9.				\$226,261.00
	Add the current value on lines 55.1 Copy the total to line 88.	through 55.6 and entrie	es from any additional shee	ets.	
57.	Is a depreciation schedule availa  ■ No □ Yes	able for any of the prop	erty listed in Part 9?		
58.	Has any of the property listed in	Part 9 been appraised	by a professional within	the last year?	
	■ No □ Yes				
D1.40					
Part 10: 59. <b>Doe</b> s	Intangibles and intellectual parties the debtor have any interests in		ual property?		_
_	-	<b>-</b>			
	o. Go to Part 11. es Fill in the information below.				
<b>—</b> 16	s Fill III the information below.				
	General description		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks	, and trade secrets			
61.	Internet domain names and web Malyespub.com	sites	Unknown	N/A	!'\$'!'
62.	Licenses, franchises, and royalt	ies			
63.	Customer lists, mailing lists, or	other compilations			
64.	Other intangibles, or intellectual	property			
65.	Goodwill				
66.	Total of Part 10.				\$0.00
	Add lines 60 through 65. Copy the	total to line 89.			
67.	Do your lists or records include ■ No □ Yes	personally identifiable	information of customer	s (as defined in 11 U.S.C.§§ 1	01(41A) and 107?

Official Form 206A/B

Debtor	LCAV Enterprises, LLC	Case number (If known)
	Name	
68.	Is there an amortization or other similar schedule	available for any of the property listed in Part 10?
	■ No	
	□Yes	
69.	Has any of the property listed in Part 10 been app	raised by a professional within the last year?
	■ No	
	Yes	
Part 11:	All other assets	
-	s the debtor own any other assets that have not yet de all interests in executory contracts and unexpired le	•
■ No	o. Go to Part 12.	
☐ Ye	es Fill in the information below.	

Name

Case number (If known)

### Part 12: Summary

In Pa	art 12 copy all of the totals from the earlier parts of the form Type of property	Current value of	Current value of real
		personal property	property
80.	Cash, cash equivalents, and financial assets.  Copy line 5, Part 1	\$4,439.00	
81.	Deposits and prepayments. Copy line 9, Part 2.	\$0.00	
82.	Accounts receivable. Copy line 12, Part 3.	\$500.00	
83.	Investments. Copy line 17, Part 4.	\$0.00	
84.	Inventory. Copy line 23, Part 5.	\$5,500.00	
85.	Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86.	Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$1,200.00	
87.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$96,600.00	
88.	Real property. Copy line 56, Part 9	>	\$226,261.00
89.	Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90.	All other assets. Copy line 78, Part 11.	+\$0.00	
91.	Total. Add lines 80 through 90 for each column	\$108,239.00 +	91b. <b>\$226,261.00</b>
92.	Total of all property on Schedule A/B. Add lines 91a+91b=92		\$334.500.00

Fill in this information to identify the	case:		
Debtor name LCAV Enterprises,			
<u>-</u>	WESTERN DISTRICT OF NEW YORK		
Case number (if known)		_	Check if this is an amended filing
Official Form 206D			
	Who Have Claims Secured by Pr	operty	12/15
Be as complete and accurate as possible.			
. Do any creditors have claims secured by	debtor's property?		
$\square$ No. Check this box and submit p	age 1 of this form to the court with debtor's other schedules.	Debtor has nothing else to	report on this form.
Yes. Fill in all of the information be	pelow.		
Part 1: List Creditors Who Have Se	ecured Claims		
List in alphabetical order all creditors w claim, list the creditor separately for each clai	ho have secured claims. If a creditor has more than one secured m.	Column A  Amount of claim	Column B  Value of collateral
, ,		Do not deduct the value of collateral.	that supports this claim
2.1 Citizens One	Describe debtor's property that is subject to a lien	\$54,488.00	\$60,000.00
Creditor's Name P.O. Box 42113	2021 GMC Denali		
Providence, RI 02940			
Creditor's mailing address	Describe the lien  Truck loan		
	Is the creditor an insider or related party?		
Creditor's email address, if known	No □		
Creditor's email address, il known	☐ Yes Is anyone else liable on this claim?		
Date debt was incurred	■ No		
2020 Last 4 digits of account number	☐ Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
0117  Do multiple creditors have an	As of the petition filing date, the claim is:		
interest in the same property?	Check all that apply		
■ No	☐ Contingent ☐ Unliquidated		
Yes. Specify each creditor, including this creditor and its relative priority.	☐ Disputed		
2.2 Kevin Hogan	Describe debtor's property that is subject to a lien	\$155,000.00	\$226,261.00
Creditor's Name	92 E Market Street		
818 Lincoln Street Elmira, NY 14901	Corning, NY 14830		
Creditor's mailing address	Describe the lien		
	Mortgage Is the creditor an insider or related party?		
	No		
Creditor's email address, if known	. ■ N0 □ Yes		
	Is anyone else liable on this claim?		
Date debt was incurred	■ No		
2013 Last 4 digits of account number	☐ Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
Do multiple creditors have an	As of the netition filling date, the claim is:		

Official Form 206D

interest in the same property?

Check all that apply

De	ebtor LCAV Enterprises, LLC		Case number (if known)		
	Name				
	■ No □ Yes. Specify each creditor, including this creditor and its relative priority.	☐ Contingent ☐ Unliquidated ☐ Disputed			
	Total of the dollar amounts from Part 1,	Column A, including the amounts from the Addit a Debt Already Listed in Part 1	ional Page, if any. \$2	209,488.00	
ass	signees of claims listed above, and attori	·	·	,	
ıτn	Name and address	sted in Part 1, do not fill out or submit this page. I	On which line in Pages are need on the pages are	art 1 did Last 4 digits of	r

Fill ir	this information to identify the case:			
Debte	or name LCAV Enterprises, LLC			
Unite	d States Bankruptcy Court for the: WESTERN	DISTRICT OF NEW YORK		
Case	number (if known)			
			_	if this is an ed filing
Offi	cial Form 206E/F			
Sch	nedule E/F: Creditors Who	Have Unsecured Claims		12/15
List the Person	e other party to any executory contracts or unexpir nal Property (Official Form 206A/B) and on <i>Schedul</i>	creditors with PRIORITY unsecured claims and Part 2 for creditors red leases that could result in a claim. Also list executory contracts e G: Executory Contracts and Unexpired Leases (Official Form 206 t 1 or Part 2, fill out and attach the Additional Page of that Part incl	s on <i>Schedule A/B:</i> 6G). Number the en	Assets - Real and
Part	1: List All Creditors with PRIORITY Unsec	ured Claims		
1.	Do any creditors have priority unsecured claims?	' (See 11 U.S.C. § 507).		
	☐ No. Go to Part 2.			
	Yes. Go to line 2.			
2	. List in alphabetical order all creditors who have	unsecured claims that are entitled to priority in whole or in part. If	the debtor has more	than 3 creditors
	with priority unsecured claims, fill out and attach the	Additional Page of Part 1.		
			Total claim	Priority amount
2.1	Priority creditor's name and mailing address NYS Dept. of Taxation & Finance Bankruptcy Unit PO Box 5300 Albany, NY 12205-0300	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$67,165.00	\$67,165.00
	Date or dates debt was incurred <b>2017</b>	Basis for the claim: Sales Tax		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	No		
	unsecured claim. 11 0.3.6. § 307(a) (a)	Yes		
Part 3		nsecured Claims n nonpriority unsecured claims. If the debtor has more than 6 creditor	rs with nonpriority ur	secured claims, fill
	out and attach the Additional Page of Part 2.	, ,		mount of claim
3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all tha	t annie	¢6 755 00
3.1	American Express	☐ Contingent	тарріу.	\$6,755.00
	P.O. Box 981535	☐ Unliquidated		
	El Paso, TX 79998	☐ Disputed		
	Date(s) debt was incurred 2015	Basis for the claim: <u>Credit</u>		
		Basis for the claim: <u>Credit</u> Is the claim subject to offset? ■ No □ Yes		
3.2	Date(s) debt was incurred 2015	Is the claim subject to offset? ■ No □ Yes	t apply.	\$70,495.00
3.2	Date(s) debt was incurred 2015  Last 4 digits of account number 1005  Nonpriority creditor's name and mailing address  NYS Dept. of Taxation & Finance	Is the claim subject to offset? ■ No □ Yes	t apply.	\$70,495.00
3.2	Date(s) debt was incurred 2015  Last 4 digits of account number 1005  Nonpriority creditor's name and mailing address NYS Dept. of Taxation & Finance Bankruptcy Unit	Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that	t apply.	\$70,495.00
3.2	Date(s) debt was incurred 2015  Last 4 digits of account number 1005  Nonpriority creditor's name and mailing address NYS Dept. of Taxation & Finance Bankruptcy Unit PO Box 5300	Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that	t apply.	\$70,495.00
3.2	Date(s) debt was incurred 2015  Last 4 digits of account number 1005  Nonpriority creditor's name and mailing address NYS Dept. of Taxation & Finance Bankruptcy Unit	Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that Contingent Unliquidated	t apply.	\$70,495.00

page 1 of 2

Official Form 206E/F

Debtor	LCAV Enterprises, LLC	Case number (if known)	
	Name		

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

**5c. Total of Parts 1 and 2** Lines 5a + 5b = 5c.

		Total of claim amounts
5a.		\$ 67,165.00
5b.	+	\$ 77,250.00
5c.		\$ 144,415.00

Fill in	this information to identify the case:		
	r name LCAV Enterprises, LLC		
		DIGT OF NEW YORK	
United	d States Bankruptcy Court for the: WESTERN DISTR	RICT OF NEW YORK	
Case	number (if known)	☐ Check	if this is an ed filing
Offi∂	cial Form 206G		
	edule G: Executory Contract	s and Uneynired Leases	12/15
		is needed, copy and attach the additional page, number the entries of	
	oes the debtor have any executory contracts or un  No. Check this box and file this form with the debtor's	nexpired leases? s other schedules. There is nothing else to report on this form.	
		ntacts of leases are listed on Schedule A/B: Assets - Real and Personal	Property
2. Lis	st all contracts and unexpired leases	State the name and mailing address for all other whom the debtor has an executory contract or ulease	
2.1	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of		

Fill in th	s information to identify the	ne case:		
Debtor n	ame LCAV Enterprise	s, LLC		
United S	ates Bankruptcy Court for th	e: WESTERN DISTRICT OF NEW YORK		
Case nur	nber (if known)			Check if this is an amended filing
	al Form 206H dule H: Your Co	odebtors		12/15
	mplete and accurate as po al Page to this page.	ssible. If more space is needed, copy the Additiona	al Page, numbering the entries	s consecutively. Attach the
1. Do	you have any codebtors	•		
□ No. C	heck this box and submit thi	s form to the court with the debtor's other schedules. N	othing else needs to be reporte	d on this form.
cred	itors, Schedules D-G. Inclu	all of the people or entities who are also liable for a de all guarantors and co-obligors. In Column 2, identif he codebtor is liable on a debt to more than one credit	y the creditor to whom the debt i	is owed and each schedule
	Column 1: Codebtor		Column 2: Creditor	
	Name	Mailing Address	Name	Check all schedules that apply:
2.1	Larry L. Cavallaro	19 Elm Street, Apt 101 Corning, NY 14830	NYS Dept. of Taxation & Finance	□ D ■ E/F2.1 □ G

Fil	I in this information to identify the case:				
De	btor name LCAV Enterprises, LLC				
Ur	aited States Bankruptcy Court for the: WESTERN DISTRIC	CT OF NEW YORK			
Ca	se number (if known)				Check if this is an amended filing
					, and the second
O	fficial Form 207				
St	atement of Financial Affairs for No	n-Individu	als Filing for Ban	kruptcy	04/19
	e debtor must answer every question. If more space is n te the debtor's name and case number (if known).	eeded, attach a se	eparate sheet to this form. C	n the top of	any additional pages,
Pa	rt 1: Income				
1.	Gross revenue from business				
	□ None.				
	Identify the beginning and ending dates of the debtor which may be a calendar year	's fiscal year,	Sources of revenue Check all that apply		Gross revenue (before deductions and exclusions)
	From the beginning of the fiscal year to filing da	ate:	Operating a business		r \$12,000.00
	From 1/01/2021 to Filing Date		☐ Other		
	For prior year:		Operating a business		\$141,000.00
	From 1/01/2020 to 12/31/2020		☐ Other		
	For year before that: From 1/01/2019 to 12/31/2019		Operating a business		\$224,500.00
	7672676 6 12672676		Other		
2.	Non-business revenue Include revenue regardless of whether that revenue is taxal and royalties. List each source and the gross revenue for each		•		ney collected from lawsuits,
	■ None.				
			Description of sources of	revenue	Gross revenue from each source (before deductions and exclusions)
Pa	rt 2: List Certain Transfers Made Before Filing for Ba	nkruptcy			,
3.	Certain payments or transfers to creditors within 90 day List payments or transfersincluding expense reimburseme filing this case unless the aggregate value of all property tra and every 3 years after that with respect to cases filed on or	entsto any creditor	r, other than regular employee editor is less than \$6,825. (Thi		
	■ None.				
	Creditor's Name and Address	Dates	Total amount of value	Reasons fo Check all the	r payment or transfer at apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Official Form 207

	or cosigned by an insider unless the aggregate				
	may be adjusted on 4/01/22 and every 3 years listed in line 3. <i>Insiders</i> include officers, directed debtor and their relatives; affiliates of the debtor.	ors, and anyone in control	of a corporate debtor and their rela	atives; general partn	ers of a partnership
	■ None.				
	Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for pay	ment or transfer
5.	Repossessions, foreclosures, and returns List all property of the debtor that was obtained a foreclosure sale, transferred by a deed in lieu				d by a creditor, sold at
	None				
	Creditor's name and address	Describe of the Prope	erty	Date	Value of property
6.	Setoffs List any creditor, including a bank or financial i of the debtor without permission or refused to debt.				
	None				
	Creditor's name and address	Description of the act	ion creditor took	Date action was taken	Amount
Р	art 3: Legal Actions or Assignments				
	□ None.  Case title Case number	Nature of case	Court or agency's name and address	Status of ca	ase
	7.1. Only in the context of NYS Sales tax audit			☐ Pending☐ On appe☐ Conclud	eal
8.	Assignments and receivership List any property in the hands of an assignee f receiver, custodian, or other court-appointed o			nis case and any pro	perty in the hands of a
	■ None				
Р	art 4: Certain Gifts and Charitable Contrib	utions			
9.	List all gifts or charitable contributions the the gifts to that recipient is less than \$1,000		nt within 2 years before filing th	is case unless the a	aggregate value of
	None				
	Recipient's name and address	Description of the gif	ts or contributions Da	ates given	Value
Р	art 5: Certain Losses				
10	All lands from Car that an all an arrange				
	All losses from fire, theft, or other casualty	within 1 year before filir	g this case.		
	None	within 1 year before filir	g this case.		

Case number (if known)

Debtor LCAV Enterprises, LLC

ebtor <u>L</u>	.CAV Enterprises, LLC	Case number	(if known)	
	iption of the property lost and he loss occurred	Amount of payments received for the loss  If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property los
art 6:	Certain Payments or Transfers			
List any of this ca		of property made by the debtor or person acting on behang attorneys, that the debtor consulted about debt consc		
☐ Non	e.			
	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount o
11.1.	Gleichenhaus, Marchese & Weishaar, P.C. 930 Convention Tower 43 Court Street Buffalo, NY 14202	Attorney Fees	02/2021	\$10,000.0
	Email or website address			
	Who made the payment, if not deb	tor?		
11.2.	William Winspear, Esq.	Special tax counsel	2021	
	Email or website address			
	Who made the payment, if not deb	tor?		
List any to a self-	settled trust or similar device. nclude transfers already listed on this s	e by the debtor or a person acting on behalf of the debto	or within 10 years befo	re the filing of this case
Name	of trust or device	, , , , , , , , , , , , , , , , , , ,	Dates transfers vere made	Total amount o
List any to 2 years b	before the filing of this case to another		a person acting on be ourse of business or f	half of the debtor within

Who received transfer? Description of property transferred or Date transfer Total amount or Address payments received or debts paid in exchange was made

Part 7: Previous Locations

### 14. Previous addresses

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 3

Debtor	LCAV Enterprises, LLC		Case num	ber (if known)	
List	all previous addresses used by the debtor	within 3 years before filin	g this case and the dates tl	ne addresses were u	sed.
	Does not apply				
	Address			Dates of occ	upancy
Part 8:	Health Care Bankruptcies				
Is th - dia	Ith Care bankruptcies le debtor primarily engaged in offering servignosing or treating injury, deformity, or disposition any surgical, psychiatric, drug treat	sease, or			
	No. Go to Part 9.				
	Yes. Fill in the information below.				
	Facility name and address	Nature of the busines the debtor provides	ss operation, including ty	pe of services	If debtor provides meals and housing, number of patients in debtor's care
Part 9:	Personally Identifiable Information				
	No. Yes. State the nature of the information hin 6 years before filing this case, have fit-sharing plan made available by the d No. Go to Part 10. Yes. Does the debtor serve as plan adm	any employees of the de ebtor as an employee be		any ERISA, 401(k),	403(b), or other pension or
Part 10	Certain Financial Accounts, Safe De	posit Boxes, and Storaç	ge Units		
With mov Inclu	sed financial accounts nin 1 year before filing this case, were any red, or transferred? ude checking, savings, money market, or co peratives, associations, and other financial	other financial accounts; c		,	, , ,
	None Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account wa closed, sold, moved, or transferred	before closing or transfer
18	3.1. Corning Credit Union	XXXX-	☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other	Debtor closed Checking account and opened a new checking account	a

19. **Safe deposit boxes**List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this

Dec	Cor LCAV Enterprises, LLC		Case number (if known)	
	None			
	Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
L	off-premises storage ist any property kept in storage units or warehouse thich the debtor does business.	s within 1 year before filing this case	. Do not include facilities that are in a pa	rt of a building in
	None			
	Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Par	11: Property the Debtor Holds or Controls Th	at the Debtor Does Not Own		
L	roperty held for another ist any property that the debtor holds or controls the ot list leased or rented property.	at another entity owns. Include any p	roperty borrowed from, being stored for,	or held in trust. Do
ı	None			
Par	12: Details About Environment Information			
	ne purpose of Part 12, the following definitions appl Environmental law means any statute or governme medium affected (air, land, water, or any other med	ntal regulation that concerns pollutio	n, contamination, or hazardous material	, regardless of the
	Site means any location, facility, or property, includowned, operated, or utilized.	ling disposal sites, that the debtor no	w owns, operates, or utilizes or that the	debtor formerly
	Hazardous material means anything that an enviro similarly harmful substance.	nmental law defines as hazardous or	toxic, or describes as a pollutant, conta	minant, or a
Rep	ort all notices, releases, and proceedings known	n, regardless of when they occurre	ed.	
22.	Has the debtor been a party in any judicial or ac	dministrative proceeding under an	y environmental law? Include settlem	ents and orders.
	■ No. □ Yes. Provide details below.			
	Case title Case number	Court or agency name and address	Nature of the case	Status of case
	as any governmental unit otherwise notified the nvironmental law?	e debtor that the debtor may be lia	ble or potentially liable under or in vio	olation of an
	■ No. □ Yes. Provide details below.			
	Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
24. <b>F</b>	as the debtor notified any governmental unit of	any release of hazardous materia	1?	
	■ No. □ Yes. Provide details below.			
	Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Official Form 207

	sinesses in which the debtor has business for which the debtor was a		othorwico a porce	on in con	tral within 6 years hefe	are filing this case
	nis information even if already listed		лпегиізе а регос	JII III COII	nor within o years bere	ne ming this case.
■ None	)					
Business	name address	Describe the nature of the	business		oyer Identification nu include Social Security n	
				Dates	business existed	
26a. List	ecords, and financial statements all accountants and bookkeepers w lone	ho maintained the debtor's boo	oks and records v	within 2 y	ears before filing this	case.
Name	and address					Date of service From-To
26a.1.	Rick Beals, CPA					2015+
□ n	in 2 years before filing this case.  None  and address					Date of service
26b.1.	NYS Dept. of Taxation & Fi Bankruptcy Unit PO Box 5300	nance				From-To 2020 Sales tax audit
_	Albany, NY 12205-0300  all firms or individuals who were in plane	possession of the debtor's boo	ks of account and	d records	s when this case is file	d.
Name	and address				oooks of account and lable, explain why	records are
	all financial institutions, creditors, ar ement within 2 years before filing thi		cantile and trade	agencie	s, to whom the debtor	issued a financial
	lone					
Name	and address					
27. Inventor Have any	ies r inventories of the debtor's property	been taken within 2 years bef	ore filing this cas	se?		
■ No	s. Give the details about the two mo	ost recent inventories.				
	Name of the person who supervis nventory	ed the taking of the	Date of inven	tory	The dollar amount a or other basis) of ea	nd basis (cost, market, ch inventory
	debtor's officers, directors, mana ol of the debtor at the time of the f		ners, members i	n contro	ol, controlling shareh	olders, or other people
Name	hhΑ	ress	P	osition	and nature of anv	% of interest, if

Case number (if known)

Official Form 207

Larry L. Cavallaro

Debtor LCAV Enterprises, LLC

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Sole member

19 Elm Street, Apt 101

Corning, NY 14830

page 6

any

100%

Debtor LCAV Enterprises, LLC Cas		ase number (if known)				
29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?						
	No Yes. Identify below.					
With	ments, distributions, or withdrawals cre in 1 year before filing this case, did the deb s, credits on loans, stock redemptions, and	otor provide an insider with value in any form,	including s	salary, other compens	sation, draws, bonuses,	
	No					
	Yes. Identify below.					
	Name and address of recipient	Amount of money or description and va	lue of	Dates	Reason for providing the value	
30	1.1 Larry L. Cavallaro 19 Elm Street, Apt 101 Corning, NY 14830	Salary: \$500/week		\$6500: 01/01-03/31/20 20	Compensation	
	Relationship to debtor Sole Member					
31. <b>With</b>	nin 6 years before filing this case, has th	e debtor been a member of any consolida	ted group	for tax purposes?		
	No Yes. Identify below.					
Nam	e of the parent corporation		Employe	er Identification nun	nber of the parent	
32. With	nin 6 years before filing this case, has th	e debtor as an employer been responsible	e for contri	buting to a pension	fund?	
□	No Yes. Identify below.					
Nam	e of the pension fund		Employe	er Identification nun	nber of the parent	

corporation

Debtor LCAV Enterprises, LLC	Case number (if known)				
Part 14: Signature and Declaration					
<b>WARNING</b> Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
I have examined the information in this Statement of Finand correct.	nancial Affairs and any attachments and have a reasonable belief that the information is true				
I declare under penalty of perjury that the foregoing is true	ue and correct.				
Executed on March 4, 2021					
/s/ Larry L. Cavallaro Signature of individual signing on behalf of the debtor	Printed name				
Position or relationship to debtor Sole Memeber					

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached? ■ No

☐ Yes

In re	LCAV Enterprises, LLC		Case No.			
	•	Debtor(s)	Chapter	11		
	DISCLOSURE OF COMPENSAT	TION OF ATTORN	NEY FOR DE	EBTOR(S)		
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce ompensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in a	petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to		
				375.00 / hour		
	Prior to the filing of this statement I have received		\$	8,262.00		
	Balance Due		\$	TBD		
2. \$	1,738.00 of the filing fee has been paid.					
3.	The source of the compensation paid to me was:					
	✓ Debtor					
4. 7	The source of compensation to be paid to me is:					
	✓ Debtor					
5. [	✓ I have not agreed to share the above-disclosed compensation	n with any other person un	less they are mem	bers and associates of my law firm.		
[	I have agreed to share the above-disclosed compensation wi copy of the agreement, together with a list of the names of the	th a person or persons who he people sharing in the co	o are not members empensation is atta	or associates of my law firm. A sched.		
6.	in return for the above-disclosed fee, I have agreed to render leg	gal service for all aspects of	of the bankruptcy c	ease, including:		
t c	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed.</li> </ul>					
7. I	By agreement with the debtor(s), the above-disclosed fee does n  Representation of the debtors in any discharge any other adversary proceeding.			es, relief from stay actions or		
	CER	TIFICATION				
	certify that the foregoing is a complete statement of any agreer ankruptcy proceeding.	ment or arrangement for pa	syment to me for r	epresentation of the debtor(s) in		
М	arch ( , 2021	/s/ Robert B. Gleic	henhaus. Esg.			
_	ate	Robert B. Gleichen				
		Signature of Attorney Gleichenhaus, Marc	chese & Weisha	ar. P.C.		
		930 Convention To		•		
		43 Court Street Buffalo, NY 14202				
		(716) 845-6446 Fax	: (716) 845-647	5		
		Name of law firm				

In re _ LCAV Enterprise	es, LLC			Case No.	
		D	ebtor(s)	Chapter	11
	LIST OF E	QUITY SE	CURITY HOLDERS		
Following is the list of the De	btor's equity security holders wh	hich is prepare	ed in accordance with rule 10	007(a)(3) fo	r filing in this Chapter 11 Case
Name and last known ac business of holder	ddress or place of Secu	rity Class	Number of Securities	K	ind of Interest
Larry L. Cavallaro 19 Elm Street, Apt 101 Corning, NY 14830	100%	, o			
DECLARATION UND	DER PENALTY OF PER	JURY ON	BEHALF OF CORPO	ORATIO	N OR PARTNERSHIP
	<b>Pber</b> of the corporation nan List of Equity Security Ho				
Date March 4, 2021		Signat	ure /s/ Larry L. Cavallar	0	

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case No.

In re LCAV Enterprises, LLC

		Debtor(s)	Chapter	_ 11
	VERIFICATI	ON OF CREDITOR MA	ATRIX	
	e Memeber of the corporation named as the do the best of my knowledge.	ebtor in this case, hereby verify that	the attached	list of creditors is true and
Date:		/s/ Larry L. Cavallaro Larry L. Cavallaro/Sole Memeber Signer/Title		

American Express P.O. Box 981535 El Paso, TX 79998

Citizens One P.O. Box 42113 Providence, RI 02940

Kevin Hogan 818 Lincoln Street Elmira, NY 14901

Larry L. Cavallaro 19 Elm Street, Apt 101 Corning, NY 14830

NYS Dept. of Taxation & Finance Bankruptcy Unit PO Box 5300 Albany, NY 12205-0300

In re	LCAV Enterprises, LLC		Case No.	
		Debtor(s)	Chapter	11
	CORPORATE	E OWNERSHIP STATEMENT (I	RULE 7007.1)	
recusa a (are)	ant to Federal Rule of Bankruptcy Pro l, the undersigned counsel for <u>LCAV</u> corporation(s), other than the debtor of the corporation's(s') equity interests.	<b>Enterprises</b> , <b>LLC</b> in the above cap or a governmental unit, that directly	otioned action, or or indirectly o	vertifies that the following is wn(s) 10% or more of any
19 Eln	L. Cavallaro n Street, Apt 101 ng, NY 14830			
⊐ Nor	ne [Check if applicable]			
	n 4, 2021	/s/ Robert B. Gleichenhaus, Esq.		
Date		Signature of Attorney or Litigat Counsel for LCAV Enterprises		
		Gleichenhaus, Marchese & Weis	haar, P.C.	
		930 Convention Tower 43 Court Street		
		Buffalo, NY 14202 (716) 845-6446 Fax:(716) 845-647	·E	
		(110) 040-0440 1 ax.(110) 045-041	•	

1/1/2020 - 12/31/2020

01/01-01/31/21

281.35			Gain/Loss
1.	11631.49		Total Expenses
	89.53	POS	
	50	Repairs	
	250	Misc	
	1434.3	Rent	
	153.77	Internet	
	349.19	Cable	
	168.15	Cng	
	113.87	NYSEG	
	94.87	Garbage	
	0	Water &sewer	
	1601.85	Insurance	
	1515.66	Payroll	
	2387.75	Beer	
	1579.55	Liquor	
	1843	Taxes	
			Expenses
11912.84	11,912.84		Total
	11,912.84		Revenue

### SCHEDULE C (Form 1040 or 1040-SR)

**Profit or Loss From Business** 

(Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

(99)

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information.

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Attachment Sequence No. 09

	of proprietor					Social	security	number (SSN)	
_L	arry L Cavallaro								
A 	Principal business or profession, including product or service (see instructions)  DRINKING PLACES (ALCOHOLIC BEVERAGE)						Enter code from instructions ► 722410		
С	LCAV ENTERPRISES, LLC						mployer	ID number (EIN) (see instr.)	
E	Business address (including suite or								
	City, town or post office, state, and ZI	0							
F				(3)	Other (specify)   Other (specify)   If "No," see instructions for limit on los				
G	Did you "materially participate" in the	operati	on of this business during 2	2019?	If "No," see instructions for limit on los	ses		X Yes No	
Н	If you started or acquired this busines	s durir	ng 2019, check here					▶ 📙	
I	Did you make any payments in 2019	that w	ould require you to file Form	n(s) 10	99? (see instructions)			Yes X No	
<u>J</u>		ed Forn	ns 1099?					Yes No	
<u>Pa</u>	rt I Income							Г	
1	Gross receipts or sales. See instruction								
	Form W-2 and the "Statutory employed	e" box	on that form was checked				1	258,203	
2							2	050 003	
3							3	258,203	
4	J						5	135,000	
5	Other income including federal and state a	9 3 	or fuel toy aredit or refund (see	inotruo	······································		6	123,203	
6 7	Other income, including lederal and state g	jasoline	or luel tax credit or relund (see	Instruc	tions)		7	123,203	
	ert II Expenses. Enter exp	ense	s for husiness use of	VOLIT	home <b>only</b> on line 30.		,	123,203	
8	Advertising	8	3 101 503111033 030 01	18	Office expense (see instructions)		18		
9	Car and truck expenses (see			19	Pension and profit-sharing plans		19		
	instructions)	9		20	Rent or lease (see instructions):				
10	Commissions and fees	10		а	Vehicles, machinery, and equipmen	t	20a		
11	Contract labor (see instructions)	11		b	Other business property		20b	17,212	
12	Depletion	12		21	Repairs and maintenance		21	7,000	
13	Depreciation and section 179			22	Supplies (not included in Part III)		22		
	expense deduction (not included in Part III) (see			23	Taxes and licenses		23	21,565	
	instructions)	13		24	Travel and meals:				
14	Employee benefit programs			а	Travel		24a		
	(other than on line 19)	14	0.050	b	Deductible meals (see				
15	Insurance (other than health)	15	9,050		instructions)		24b	10 177	
16	Interest (see instructions):	40.		25	Utilities		25	19,177	
a	Mortgage (paid to banks, etc.)	16a 16b		26	Wages (less employment credits)		26	46,410	
b	Other	100		272	Other expenses (from line 48)		27a		
17	Legal and professional services	17	400		Reserved for future use		27b		
<del></del> 28	Total expenses before expenses for					·····	28	120,814	
29	• • • • • • • • • • • • • • • • • • • •					• '	29	2,389	
30	Expenses for business use of your ho	ome. D							
	unless using the simplified method (s	ee ins	tructions).						
	Simplified method filers only: enter	the to	tal square footage of: (a) yo	our hor	me:				
	and (b) the part of your home used for	r busir	ess: Use	the Si	implified				
24	Method Worksheet in the instructions			ne 30			30		
31	<ul><li>Net profit or (loss). Subtract line 30</li><li>If a profit, enter on both Schedule</li></ul>			3 (or <b>F</b>	orm 1040-NR. line				
	13) and on Schedule SE, line 2. (If y	•	•	,				0 200	
	trusts, enter on Form 1041, line 3.						31	2,389	
20	• If a loss, you <b>must</b> go to line 32.	4 -1 -			/	_			
32	If you shocked 32a, enter the loss of		•			$\neg$	20-		
	<ul> <li>If you checked 32a, enter the loss of Form 1040-NR, line 13) and on Sch</li> </ul>		•		,		32a 32b	All investment is at risk.	
	31 instructions). Estates and trusts, e			uie no	A OIT HITE I, SEE LITE HITE	ĺ	JZD	Some investment is not at risk.	
	<ul> <li>If you checked 32b, you must attack</li> </ul>		•	imited				at not.	
	, ou on conce one, you must allac								

### Larry L Cavallaro

	edule C (Form 1040 or 1040-SR) 2019 DRINKING PLACES (ALCOHOLIC BEVERAGE)		Page	: 2
Pa	art III Cost of Goods Sold (see instructions)			_
33	Method(s) used to value closing inventory: a X Cost b Lower of cost or market c Other (attach explanation)	nation)		
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  If "Yes," attach explanation	[	Yes X N	0
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation			0
36	Purchases less cost of items withdrawn for personal use		135,00	0
37	Cost of labor. Do not include any amounts paid to yourself			
38	Materials and supplies			
39	Other costs			
40	Add lines 35 through 39		135,00	0
		12		
41	Inventory at end of year	41		0
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4		135,00	0
	art IV Information on Your Vehicle. Complete this part only if you are claiming car or truck and are not required to file Form 4562 for this business. See the instructions for line 1 file Form 4562.	•		
43 44	When did you place your vehicle in service for business purposes? (month, day, year) ▶  Of the total number of miles you drove your vehicle during 2019, enter the number of miles you used your vehicle for:			
а	b Commuting (see instructions) c Oth	er		
45	Was your vehicle available for personal use during off-duty hours?		Yes N	0
46	Do you (or your spouse) have another vehicle available for personal use?		Yes N	
47a			Yes N	
P	If "Yes," is the evidence written?  art V Other Expenses. List below business expenses not included on lines 8-26 or line 30		Yes N	0
				_
				_
				_
				_
				_
				_
				_
				_
				_
				_
				_
	Total other expenses. Enter here and on line 27a	48		